WASTE RECEIPT # 9605825 SHIPPER ID # 990628 - 14

GENERATOR Evergreen Automotive Svcs

DRUM#	n	DESCRIPTION		% OF SOLIDS	% OF SLUDGE	% OF LIQUID	DRUM SIZE	TOTAL GALLONS	PROFILE#	STORAGE
01	Brake	FLuid		00	00	100	16		110	LOCATION
						100	16	169	12809	TF#
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DATE 7-12-99

RECEIVERS SIGNATURE M. L.

N.		Emergency	Contact Telep	hone Number					
Sale à	UNIFORM HAZARDOUS WASTE MANIFEST	Generator's US I Small Generator		Manifest Dogument N	2. Pag	e 1 Information not require		shaded areas is deral law.	
3	Generator's Name and Mailing Address Evergreen Automotive Svcs 122 Ohio Street Suite 101			AXXXX Manifest Document Number 990259126A					
4	Bellingham WA 98225 360 676-414		B. Stat	B. State Generator's ID					
5	Transporter 1 Company Name	ID Number							
7	CleanCare Transporter 2 Company Name	: WAD98847 US EPA	7147 · · · · · · · · · · · · · · · · · · ·	E. Stat	D. Transporter's Phone (253) 627–1976 E. State Transporter's ID				
	',			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		sporter's Phone		4 2 1	
1/9	Designated Facility Name and Site Address XX		divvvvv 02 543	MONOM DEPARTMENT	the contra	te Facility's ID	its in	Assertation 1	
	CleanCare Corporation 1510 Taylor Way Tacoma WA 98421		WAD98073	8512		ility's Phone	METERICALIANS	627–1976	
1	US DOT Description (Including Proper Shippin	g Name, Hazard Class.	and ID Number)	12. 0	Containers	13. Total	206) 14. Unit	ingles and second	
	нм			No.	Туре	Quantity	Wt/Vol	Waste No.	
а	X COMBUSTIBLE LIQUID, N. SPENT SOLVENT, PG III, NA1993,	o.s., co		00	1 Bm	_000/	36	D001 D008 D018 D039 WP02	
b	X NON RCRA WAST (NON CHLORINAT	E LIQUID	Fund)	00	1 200	000 16	4	WTOZ	
3					1 pr	1000 /4	14		
A C									
	i.							or discount of the control of the co	
	1a. MINERAL SPIRITS, OIL, LI 9906 28 - 49 15. Special Handling Instructions and Additional In 1a. Use ERG# 128 for 11a,	<i>C</i>	ONTACT 1-80	00-282-8128		RORGS	YCLE		
			ack #1						
	16. GENERATOR'S CERTIFICATION: I hereby deepacked, marked, and labeled, and are in all respect of lambda and large quantity generator. I certify that I practicable and that I have selected the practicable and the environment; OR, if I am a small quantity.	cts in proper condition for have a program in place	transport by highway to reduce the volume storage, or disposal co	according to applicable and toxicity of waste arrently available to me	generated to which minim	the degree I have lizes the present a	determinental determinent determinent	ed to be economically hreat to human health	
,	Printed/Typed Name D Don CAFFEL		Signature	n al	ful	1	1	Month Day Year 99	
RA	 Transporter 1 Acknowledgement of Receipt of Printed Typed Name 	Materials	Signature	,				Month Day Year	
TRANSPORTER	Can MATSI		K	My	1	_		07/08/99	
R	 Transporter 2 Acknowledgement of Receipt of Printed/Typed Name 	Materials	Signature	1 .				Month Day Year	
_	D. H		Ekuse	I Hem	ley			070999	
F	19. Discrepancy Indication Space								
ACI					noted in the	. 10		, , <u>, , , , , , , , , , , , , , , , , </u>	
T	20. Facility Owner or Operator: Certification of re	ceipt of hazardous mate	erials covered by thi	s manifest except as	noted in Iten	119.			
Y -	Printed/Typed Name		Signature				1	Month Day Year	